BELOIT HEALTH & REHABILITATION CENTER

1905 WEST HART ROAD

BELOIT	53511	Phone: (608) 365-2554		Ownership:	Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Con	junction with 1	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and Sta	affed (12/31/05):	152	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	152	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on 12/31	/05:	148	Average Daily Census:	146

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	8			
Primary Diagnosis	8	Age Groups   _	*	   Less Than 1 Year   1 - 4 Years	44.6 29.1
Developmental Disabilities	0.0	Under 65	13.5	More Than 4 Years	26.4
Mental Illness (Org./Psy)	2.0	65 - 74	12.8		
Mental Illness (Other)	0.7	75 - 84	29.1		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	36.5		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.1	Full-Time Equivalent	
Cancer	4.7			Nursing Staff per 100 Resid	lents
Fractures	9.5		100.0	(12/31/05)	
Cardiovascular	15.5	65 & Over	86.5		
Cerebrovascular	6.8			RNs	7.8
Diabetes	3.4	Gender	%	LPNs	13.0
Respiratory	4.7			Nursing Assistants,	
Other Medical Conditions	52.7	Male	29.1	Aides, & Orderlies	40.4
		Female	70.9		
	100.0			İ	
			100.0		

## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	14	14.1	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	14	9.5
Skilled Care	29	100.0	304	79	79.8	120	2	100.0	120	18	100.0	191	0	0.0	0	0	0.0	0	128	86.5
Intermediate				6	6.1	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	4.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	29	100.0		99	100.0		2	100.0		18	100.0		0	0.0		0	0.0		148	100.0

BELOIT HEALTH & REHABILITATION CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period				0. 27 - 24			
					% Needing		Total
Percent Admissions from:		Activities of	%		sistance of		Number of
Private Home/No Home Health	7.7	Daily Living (ADL)	Independent	One	Or Two Staff	-	Residents
Private Home/With Home Health	0.0	Bathing	4.7		83.1	12.2	148
Other Nursing Homes	1.9	Dressing	16.9		76.4	6.8	148
Acute Care Hospitals	90.4	Transferring	21.6		66.9	11.5	148
Psych. HospMR/DD Facilities	0.0	Toilet Use	16.9		73.6	9.5	148
Rehabilitation Hospitals	0.0	Eating	60.8		31.1	8.1	148
Other Locations	0.0	*****	******	*****	******	******	******
Total Number of Admissions	375	Continence		용	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Extern	nal Catheter	10.1	Receiving Resp	iratory Care	10.1
Private Home/No Home Health	52.8	Occ/Freq. Incontiner	nt of Bladder	42.6	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	29.7	Receiving Suct	ioning	0.0
Other Nursing Homes	6.9	_			Receiving Osto	my Care	2.0
Acute Care Hospitals	14.7	Mobility			Receiving Tube	Feeding	3.4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	6.1
Rehabilitation Hospitals	0.0				5	•	
Other Locations	6.4	Skin Care			Other Resident C	haracteristics	
Deaths	19.2	With Pressure Sores		17.6	Have Advance D	irectives	65.5
Total Number of Discharges		With Rashes		7.4	Medications		
(Including Deaths)	375				Receiving Psyc	hoactive Drugs	60.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

***********	******	*****	******	*****	*****	*****	*****	*****	*****
		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Proj	prietary	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	90	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.1	85.8	1.12	90.1	1.07	88.8	1.08	88.1	1.09
Current Residents from In-County	89.9	81.3	1.11	84.9	1.06	83.2	1.08	77.6	1.16
Admissions from In-County, Still Residing	14.7	16.8	0.88	18.1	0.81	18.7	0.78	18.1	0.81
Admissions/Average Daily Census	256.8	216.2	1.19	188.0	1.37	177.7	1.45	162.3	1.58
Discharges/Average Daily Census	256.8	217.8	1.18	191.1	1.34	179.2	1.43	165.1	1.56
Discharges To Private Residence/Average Daily Census	135.6	100.9	1.34	87.1	1.56	83.4	1.63	74.8	1.81
Residents Receiving Skilled Care	95.9	97.2	0.99	96.6	0.99	96.3	1.00	92.1	1.04
Residents Aged 65 and Older	86.5	91.5	0.94	90.0	0.96	91.3	0.95	88.4	0.98
Title 19 (Medicaid) Funded Residents	66.9	61.7	1.08	62.3	1.07	61.8	1.08	65.3	1.02
Private Pay Funded Residents	12.2	19.4	0.63	20.8	0.58	22.5	0.54	20.2	0.60
Developmentally Disabled Residents	0.0	0.9	0.00	0.9	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	2.7	28.9	0.09	34.5	0.08	34.8	0.08	32.9	0.08
General Medical Service Residents	52.7	23.7	2.22	22.0	2.40	23.0	2.29	22.8	2.32
Impaired ADL (Mean)	43.0	47.9	0.90	48.8	0.88	48.4	0.89	49.2	0.87
Psychological Problems	60.1	59.1	1.02	59.9	1.00	59.5	1.01	58.5	1.03
Nursing Care Required (Mean)	5.8	7.1	0.82	7.3	0.80	7.2	0.81	7.4	0.79